PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

2000.108500DE0315

. CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS					(Column 2)					OR		
			24				<u> </u>	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		SIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			24 minus 20= * 4					X\$ 9=		OR	X\$18=	72
INDEPENDENT CLAIMS			3 minus 3 = * 0					X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								140=	· ·	OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							T	OTAL		OR	TOTAL	822
CLAIMS AS AMENDED - PART II											OTHER	THAN
		SMALL ENTITY				SMALL						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA	f	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	>	X\$ 9=		OR	X\$18=	
	Independent	ependent		***	- CL A IA A	=		K42 =		OR	X84=	
L	FINOT FNESE	INTATION OF IVI	JUIPLE DEF	ENDENT	CLAIIVI		+	140=		OR	+280=	
	TOTAL									OR	TOTAL	
ADDIT. FEEON ADDIT. FEEON ADDIT. FEEON ADDIT. FEEON ADDIT. FEEON ADDIT. FEE												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQV	Total	*	Minus	**	7 7 1	=		(\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	 	<42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UH		
							_+	140=		OR	+280=	
		ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE						
		(Column 1)		(Colun		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- 01 4114	<u> </u>	>	(42=	*	OR	X84=	
L	FIRST PRESE	NTATION OF MI	JUIPLE DEF	ENDENI	CLAIM		+	140=		OR	+280=	
*	If the entry in colu	mn 1 is less than th mber Previously Pa	ne entry in colu	mn 2, write	"0" in co	lumn 3.	<u> </u>	TOTAL			TOTAL	
***	If the "Highest Nu	mber Previously Pa mber Previously Pa aber Previously Pa	aid For" IN THI	S SPACE i	s less tha	n 3, enter "3."	700	IT. FEE L in the app	ropriate box		ADDIT. FEE umn 1.	